File with:



# IA FTHICE

| (4)County Central Committee ( )                | o same as on Statement of committee you are report Standing for Retention Cand ) County Candidate (8) Cit by PAC (9) City PAC (10) | •  | al C ( Con Log Sca                        | ORM DR-2 IV. 07/2007) Office Use Ord Irm. # god In Inhed Coputer Ited |                 |
|--|--|--|---|---|-----------------|
| Late reports are subject to possis             | W. Ball  | ties. Pursuant to lowa Code sections 688.32  3 1 9 - 3 65 175  TELEPHONE   |   |   |                 |
| AM FILING A November 19                        | Pth  | REPORT FOR (1) ELECTION Indicate by  |   | ECTION YEA  | R.              |
|  |  | murum uj   |   | -   |                 |
| CHECK IF AMENDMENT T                           | U REPURI DATED   |  | Local Comm                                | itees, enter Date   | of Election     |
|  | ation) report and attach N<br>o file reports until a DR-3  | lotice of Dissolution Form DR-3. is filed.)  | County & Loc<br>which Election            | al Committees,<br>n is held   | enter County in |
| STATEM   | ENT OF CASH ON   | HAND   |   |   |                 |
| CASH ON HAND at the beginn committee. This amo | ning of the reporting perio  | nd. (Total of all funds held by the<br>as the cash on hand at the end<br>his is first report filed.)   | . o 1114 - 1860- <b>a</b> a a <b>. \$</b> | 0.00  |                 |
| ADD TOTAL MONEY                                | Y TAKEN IN THIS PERK   | oo oo  |   |   |                 |
| Schedule A: Cash C                             | ontributions total (Attach   | Schedule A) (*also see in-kind below)  | ************                              | 1,900.00  |                 |
| Schedule F: Loans F                            | leceived total (Attach Sci   | hedule F) :  | vervenna no. i svet                       | 100.00  |                 |
| Schedule H: Total S                            | ales of Campaign Proper  | ty (Attach Schedule H)   | · · · · · · · · · · · · · · · · · · ·     | 0.00  |                 |
| (Schedule )                                    | l applies to Candidates  | 'Committees Only) SUB-TOTAL  | 28 54 4 54 WWW 15(1) \$                   | 2,000.00  |                 |
| SUBTRACT TOTAL                                 | MONEY SPENT THIS P   | ERIOD  |   |   |                 |
| Schedule B: Expend                             | kures total (Attach Sched  | tule θ) (**also see debts and loans below  | )   | 677.09  |                 |
| Schedule F: Loan Re                            | spayments total (Attach S  | Schedule F) or chromosomono versional consider consider considerations   | *****                                     | 0.00  |                 |
| CASH ON HAND at the end of                     | this reporting period (if fi   | inal report balance must be zero)  | ******                                    | 1,322.91  |                 |
| **UNPAID BILLS (From Sched                     | tule D - Attach Schedule   | D): LIELA ).). 244. 1.00 244. 1.00 244. 1.00 245. 1.00 2 |   | 1,789.46  |                 |
|  |  | Schedule E)  | -   | 0.00  |                 |
| ,  |  | Schedule F).xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx   |   | 100.00  |                 |

YES \_ NO

0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

CANDIDATE COMMITTEES ONLY:

## For Instructions, See Back of Form

## Rester Phone

SCHEDULE

(Rev. 07/03)

MONETARY

RECEIPTS

## CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

| COMMITTEE NAME (Must be same as on Statement of Organization) | CHECK THIS BOX IF AMENDING FORM |
|---|---------------------------------|
| Iowans for Josh Thurston                                      |                                 |

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 688.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE<br>RECEIVED<br>(MM/DD/YR) | PAC ID NUMBER<br>(if applicable)<br>AND PAC CHECK<br>NUMBER | NAME AND ADDRESS OF CONTR  | RELATIONSHIP<br>TO CANDIDATE*<br>(if applicable) | AMOUNT<br>RECEIVED | V IF FOR<br>FUND<br>RAISER<br>INCOME |
|--------------------------------|---|--|--|--------------------|--------------------------------------|
| 11-04-09                       | CK# 1/014   | Linn Eagles<br>PO Box 11543<br>Cedar Rapids, IA 52410              |  | \$1000.00          |                                      |
| 11-04-09                       | CK# 9123  | Richard Bell<br>3101 12th Ave SW<br>Cedar Rapids, IA 52404         |  | 100.00             |                                      |
| 11-08-09                       | CK#<br>5590   | Jeffrey Elgin<br>6940 Bowman LN NE<br>Codar Rapids, IA 52402       |  | 100.00             |                                      |
| 11-08-09                       | ID#<br>CK#<br>5752  | Kathleen Banowetz<br>PO Box 295<br>Etv. JA 52227                   |  | 10.00              |                                      |
| 11-08-09                       | ID# <sub>8442</sub><br>CK# <sub>1631</sub>                  | The Hawkeye Pac<br>PO Box 7255<br>Des Moines, IA 50309             |  | 500.00             |                                      |
| 11-08-09                       | ID#<br>CK# <sub>5360</sub>                                  | Herbert Beer<br>1617 C Ave NW<br>Cedar Rapids, IA 52405            |  | 25.00              |                                      |
| 11-08-09                       | ID#<br>CK# <sub>10862</sub>                                 | Mary Craig<br>3915 Johnson Ave NW<br>Cedar Rapids, IA 52405        |  | 25,00              |                                      |
| 11-09-09                       | ID#<br>CK# <sub>4267</sub>                                  | Sherry Puchs<br>1115 30th St NE<br>Cedar Rapids, 1A 52402          |  | 25.00              |                                      |
| 11-10-09                       | iD#<br>CK#<br>6281  | Scott Olson<br>6467 Quail Ridge Dr SW<br>Cedar Rapids, IA 52404    |  | 50.00              |                                      |
| 11-10-09                       | ID#<br>CK#<br>9050  | Bonnivere Stepanek<br>226 20th Street NW<br>Cedar Rapids, IA 52405 |  | 20.00              |                                      |
|                                |   | TOTA   | SUB-TOTAL  LL (If last page of this schedule)    | <b>\$</b> 1855.00  |                                      |

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2

#### For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

| CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds) | (Rev. 07/03) | RECEIPTS                     |
|---|--------------|------------------------------|
| COMMITTEE NAME (Must be same as on Statement of Organization)       |              | CK THIS BOX IF<br>NDING FORM |
| lowans for Josh Thurston  |              |                              |

SCHEDULE

Reset Form.

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC EVENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 688.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE<br>RECEIVED<br>(MM/DDYYR)   | PAC ID NUMBER<br>(if applicable)<br>AND PAC CHECK<br>NUMBER | NAME AND ADDRESS OF CONTRIBUTOR                         | RELATIONSHIP<br>TO CANDIDATE*<br>(if applicable) | AMOUNT<br>RECEIVED     | V IF FOR<br>FUND-<br>RAISER<br>INCOME |
|--|---|---|--|------------------------|---------------------------------------|
| 11-13-09   | ID#<br>CK# <sub>2239</sub>                                  | Joan Hinton 235 20th Street NW Cedar Rapids, IA 52405   | grand mother                                     | \$20.00                |                                       |
| 11-13-09   | CK#   | Uniternized Cash Contributions (3)                      |  | 25.00                  |                                       |
|  | CK#   |   |  |                        |                                       |
| ***************************************  | CK#   |   |  |                        |                                       |
| The second secon | ID#<br>CK#  |   |  |                        |                                       |
|  | ID#<br>CK#  |   |  |                        |                                       |
|  | CK#   |   |  |                        |                                       |
|  | CK#   |   |  |                        |                                       |
|  | ID#<br>CK#  |   |  |                        |                                       |
|  | CK#   |   |  |                        |                                       |
|  | * relationsh  | ity added per phone from committee  TOTAL (It last page |  | \$ 45.00<br>\$ 1900.00 |                                       |

Page 2 of 2 (for Schedule A)

<sup>&</sup>quot;Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

| arthitisesses | THE PERSON                            |          | distance of the last of the la |
|---------------|---------------------------------------|----------|--|
| 344           | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | lin      | 12 11/11/11  |
|               | A Secretary States                    | 0.00 mm  | - 10 Sec. 103  |
| 8 3           |                                       |          | 6 at 10 (10 h)   |
| 2.0           | - Care 2 22                           | 8 an - s | 200.000  |
| -             |                                       |          |  |
|               |                                       |          |  |

## EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

| SCHEDULE<br>B<br>(Rev. 07/03) |  | MONETARY<br>EXPENDITURE     |  |  |  |
|-------------------------------|--|-----------------------------|--|--|--|
|                               |  | X THIS BOX IF<br>NDING FORM |  |  |  |

| COMMITTEE NAME | (Must be | same as o | on Statement of | Organization |
|----------------|----------|-----------|-----------------|--------------|
|----------------|----------|-----------|-----------------|--------------|

Iowans for Josh Thurston

| CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM<br>EXPENDITURE<br>(Disbursement) WAS MADE   | PURPOSE<br>(DESCRIBE TRANSACTION)   | AMOUNT<br>EXPENDED  |
|--|--|---|---|
| ID#<br>CK#2000   | Wal-Mart<br>2645 Blairs Ferry Road NE<br>Coder Rapids, IA 32402  | Office supplies for lit drop, door knocking   | s 45.11   |
| ID#<br>CK# 2004  | Wal-Mart<br>2645 Blairs Ferry Road NE<br>Cedar Rapids, IA 52402  | Cell Phones   | 85.34   |
| ID#<br>CK# 2020  | Renee Schulte<br>1734 Chesnut LN NE<br>CEdar Rapids, IA 52402  | Reimburse for Mailing Supplies and<br>Postage Stamps  | 236.34  |
| ID#<br>CK#2021   | Copyworks<br>4837 1st Ave SE<br>Suite 103<br>Cedar Rapids, IA 52402  | Lit Drop Printing   | 310.36  |
| ID#<br>CK#   |  |   |   |
| ID#<br>CK#   |  |   |   |
| ID#<br>CK#   |  |   |   |
| ID#  |  |   |   |
|  | ID NUMBER (If applicable) AND PAC CHECK NUMBER ID#  CK#2000  ID#  CK#2004  ID#  CK#2020  ID#  CK#2021  ID#  CK#10#  CK#10# | ID NUMBER (If applicable) AND PAC CHECK NUMBER  ID# Wal-Mart 2645 Blairs Ferry Road NE Cedar Rapids, IA 52402  ID# Wal-Mart 2645 Blairs Ferry Road NE Cedar Rapids, IA 52402  ID# Renee Schulte 1734 Chesnut LN NE CEdar Rapids, IA 52402  ID# Copyworks 4837 1st Ave SE Suite 103 Cedar Rapids, IA 52402  ID# CK# 2021  ID# CK# ID# CK#  ID# CK# ID# CK# | ID# CK# 2020 Cedar Rapids, IA 52402  ID# Cedar Rapids, IA 52402  ID# CC# 2020 Cedar Rapids, IA 52402  ID# Copyworks 4837 1st Ave SE Suite 103 Cedar Rapids, IA 52402  ID# CK# 2021 Cedar Rapids, IA 52402  ID# CK# 2021 Cedar Rapids, IA 52402  ID# CK# 2021 Cedar Rapids, IA 52402  ID# CK# CC# COpyworks 4837 1st Ave SE Suite 103 Cedar Rapids, IA 52402  ID# CK# CK# ID# CK# ID# CK# ID# CK# ID# CK# ID# ID# CK# ID# ID# ID# ID# ID# ID# ID# ID# ID# ID |

TOTAL (if last page of this schedule)

\$ 677.09

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, poiling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lows Code 68A.402(3)(i).)

|      |   | ····· |    |   | <br>_ |
|------|---|-------|----|---|-------|
| Page | 1 |       | of | 1 |       |

(for Schedule 8)

| EMO | ASSETT TOOL | ICTIONS. | go got got | 2000 | P.F | COLUM | è |
|-----|-------------|----------|------------|------|-----|-------|---|
|     |             |          |            |      |     |       |   |

| 1                              | IAME (Must be same as on Statement of Organization) osh Thurston   |  | (Rev. 06/96) INDEBTEDNESS  CHECK THIS BOX   |
|--------------------------------|--|--|---|
| NOTE: Dabts p<br>Schedu        | previously reported that remain unpaid must be included on this ale, as well as any new obligations incurred in this period. | Reset Form   | IF AMENDING<br>FORM   |
|                                | LIGATIONS REMAINING THIS REPORTING PERI<br>ICLUDE LOANS SHOW LOANS ON SCHEDULE   |  | An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received. |
| DATE<br>INCURRED<br>(MM/OD/YR) | NAME AND ADDRESS OF PERSON<br>TO WHOM DEBT OR OBLIGATION IS OWED   | DESCRIPTION OF GOODS<br>SERVICES PROVIDED O<br>PURCHASED |   |
| 11-02-09                       | Victory Enterprises Inc.<br>5200 SW 30th Street<br>Davenport, IA 52802   | Yard Signs   | 416.83  |
| 11-09-09                       | OP Printing<br>2610 Park Ave<br>Muscatine, IA 52761  | Palm Cards, Notepads                                     | 995.67  |
| 11-11-09                       | OP Printing<br>2610 Park Ave<br>Muscatine, IA 52761  | Palm Cards   | 376.96  |
|                                |  |  |   |
|                                |  |  |   |
|                                |  |  |   |
|                                |  |  |   |
|                                | <u> </u>   | SU.  | B-TOTAL \$  |
|                                | TOTAL DEBTS OWED BY COMMITTEE A  | T THE END OF THIS REPORTING                              | PERIOD S  |

SCHEDULE

1,789.46

Page 1

of \_1

(for Schedule D)

"if actual figure is unknown, show "estimated" beside the figure.

CANDIDATE COMMITTEES NOTE:

'Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting paned for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-taising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

| MINITEE NAME                   | (Must be same as on Statement of Organization)  | 3. 12   | F LOAM<br>(Rev. 02/08) RECEIT |
|--------------------------------|---|---|-------------------------------|
| E: This schedu                 | te reports money loaned to the committee which is deposited in  ANS FROM LAST REPORTING PERIOD \$  0.00                                       | the committee account.  | CHECK THIS BO<br>AMENDING FOR |
| ITI- MONETA                    | RY LOANS RECEIVED THIS REPORTING PERIOD tource of loan, such as a bank, must be shown if a third party is                                     | involved. Include loans from c  | andidate's personal funds.)   |
| DATE<br>RECEIVED<br>(MM/DD/YR) | NAME AND ADDRESS OF LENDER<br>(Include Endorser's Name, If Applicable)  | RELATIONSHIP Y<br>CANDIDATE (# Applic   |                               |
| 10-30-09                       | Josh Thurston<br>1812 Chandler Street NW<br>Cedar Rapids, IA 52404  | Self  | <sup>8</sup> 100.00           |
|                                |   |   |                               |
|                                |   |   |                               |
|                                |   |   |                               |
|                                | TARY LOAN REPAYMENTS MADE THIS REPORTING PERIO<br>forgiven must be reported on Schedule E — In-kind Contribution                              |   | \$_160.00                     |
| (Loans )                       | orgiven must be reported on Schedule E - In-kind Contribution  NAME AND ADDRESS OF LENDER   | D ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (   | O AMOUNT REPAID               |
| (Loans                         | lorgiven must be reported on Schedule $E-$ In-kind Contribution   | <b>0</b><br>3)  | O AMOUNT REPAID               |
| (Loans )                       | orgiven must be reported on Schedule E - In-kind Contribution  NAME AND ADDRESS OF LENDER   | D ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (   | O AMOUNT REPAID               |
| (Loans )                       | orgiven must be reported on Schedule E - In-kind Contribution  NAME AND ADDRESS OF LENDER   | D ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (   | O AMOUNT REPAID               |
| (Loans )                       | orgiven must be reported on Schedule E - In-kind Contribution  NAME AND ADDRESS OF LENDER   | D ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (   | O AMOUNT REPAID Cable)  \$    |
| (Loans )                       | orgiven must be reported on Schedule E - In-kind Contribution  NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)  TOTAL CAS | D ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (   | O AMOUNT REPAID               |
| (Loans )                       | orgiven must be reported on Schedule E - In-kind Contribution  NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)  TOTAL CAS | RELATIONSHIP T CANDIDATE* (If Applie  H REPAYMENTS (PART II)  OTAL LOANS FORGIVEN | O AMOUNT REPAID  S  S  0      |